	is sign (+) Inside this box ———————————————————————————————————			U.S. Patent	Approved f	or use t	hrough 10/31 U.S. DEPART	PTO/SB/02A (11-00/2002). OMB 0651-003 MENT OF COMMERC		
f	DECLARATION		52300010	U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCAND to a collection of information unless it contains a voild OMR control municipal department of the control						
Name of Add	litlonal Joint Inventor, it	any:	[	☐ A petiti	on has been fil	ed for	this unsigne	d inventor		
	von Name (first and middle (if a	лу])			Family Na	no or	Sumame	· · · · · · · · · · · · · · · · · · ·		
200	Martin				St	eige	rwald			
Inventor's Signature	1 Colin	Their	11/10	//	DEX		Marc Date	1,2154,2005		
Residence: City	Erlangen	State		Country	Germany	,	Citizenship	German		
Mailing Address	Heinrich-Kirchner 3	2								
Mailing Address										
City	Erlangen	State		ZIP S	91056	Count	<sub>y</sub> G	ermany		
Name of Addi	tional Joint Inventor, If	any:	ַ	A patition	has been filed	for th	s unsigned	Inventor		
GN GN	en Name (first and middle [if a		Family Name or Surname							
2/00	Jörg			Degelmann						
Inventor's Signatum					DEX		Date			
Residence: City	Bindlach-Benk	- State		Country	Germany	<i>'</i>	Citizenship German			
Malling Address	Robert-Meister-Str	asse 5						-		
Mailing Address										
City I	Bindlach-Benk	State		ZIP	95463	Cour	ntry	Germany		
Name of Addit	tional Joint Inventor, if :	any:		A pelition h	as been filed fo	or this	unsigned in	ventor		
Give	n Name (first and middle (if any		Family Name or Sumame							
4-00	Jon			Heywood						
Inventor's Signature	Melegood			DEX	·····	March 21st, 2005				
Residence: City	Petistadt	State		Country	German	ıy	Großbri Citizensh	tannien German		
Mailing Address	Sandstrasse 5									
Mailing Address						,				
City	Pettstadt	State		2719	96175	Cou	inter (	Зегтапу		

Burden Hour Statement: This form is estimated to take 21 inhautes to complete. Time will vary depending upon the needs of the individual case.

Please type a	Una	In (+) inside this ter the Paperwo tid OMB contro	rk Reductio	+ on Act of 1995,	по репзап	Palent and Berluper ens s	Trademark (	Office: U.S. D	PTO: ough 9/30/00. O EPARTMENT Oi of information un	FCOMMERC	32 T	
DE	<u>CL/</u>	ARATIO	<u> </u>	- Utilit	y or	Desig	n Pat	ent A	pplicat	ion		
United States	or Ame	nefit under 35 U rica, listed belo international ap material to pate of international	ow and, ins oplication in meditor as	icial as the su the manner pr defined to 37 i	bject matte ovided by I	cution(s), or 30 er of each of the the first paragr which became	95(c) of any he claims of aph of 35 U. available be	PCT Internation this application in the second seco	onal application of the control of t	tesignating the ed in the print to discise rior application	o k e n	
U	.S. PE	rent Applic Nur	ation or mber	PCT Paren	t	1	iling Dat D/YYYY)	5 P	arent Patent (If applic			
		PCT/EP20	03/0114	55			<u>.</u>				7	
			•									
									/SB/02B anached		1	
and Trademark	k Office	nareby appoint connected there	Iwith:	ng registered p Gustomer Nun <i>OR</i> Registered pra	nber	3624		<del></del>	Piace Cu Number B ( nhel )	stomer er Code		
	Na	TDe .		Regis	tration	Thathategiada		ma	Re	Jetration Iumber	1	
Namely, the Volpe and I												
											İ	
1			no bemen (	supplements!	Registere	d Practitioner I	dormation s	heet PTO/SB/	02C attached he	reta.	1	
Direct all con	rospon	tence to: 🔀		er Number ods Label		3624 <sup>.)</sup>	OR	□ Сопе	spondence ad	dress belov	,	
Name	VC	LPE AND	KOENIC	3, P.C.			<del></del>				1	
Address											]	
Address		_									]	
City						State		ZIP				
Country				Telephon	——			Fax		<u></u>		
punishable by	true; en line er l	id further that t	hose stater ir both, und	mente were m	ada with th	ne konudadae :	that willful fo	rise statemen	on information a its and the like t jeopardize the v	an made are		
Name of Sc	ole or	First Invent	or:			A petitio	n has beer	filed for this	s unaigned inv	entor	ľ	
, , , , , ,	ven Na	me (first and r	niddle (if e	([עתנ			Fami	y Name or S			]	
1-00		Jer	S	$\Delta$	7.			Schäfe	) F		ļ	
Inventor's Signature		. /	<u>~</u>	ا د م	<u></u>	- DEX		<u> </u>	Date	MARC	H.23	ලිග
Residence: C	illy	Herzoge	enaurac	h State		Country	Ge	rmany	Citizenship	German		
Post Office Ad	idress	Spiegel	garten	strasse 4	10							
Post Office At	dress		<del>,</del>			·						
спу		Horzogenau	PIER	·	ZtP	910	74	Country	Gern	any		
Additional i	Invento	rs are being n	amed on	the <u>1</u> sup	plemental	Additional Ir	iventor(s) a	heet(s) PTC	D/SB/02A attac	ted hereto		

[Page 2 of 3 ]

## 4055 Rec'd PCT/PTO 15 MAR 2006

Express Mail Label No. EV442801839US

lease type a plus aign (+) in			Patent and Tr	ademark Offi	Se: LLS.	through 9/30/0 DEPARTME	AT DE COMMEDCE				
Under the Paperwork a valid OMB control in	mber.										
DECLARATION			R Attorney D		Schäfe	123 (4095-18-U r et al.					
PATENT A	ESIĞI	-	T USI NZIII								
	FR 1		Application	Application Number   Not Yet Known							
(0. 0		,	Filing Date	TTOTAL							
Declaration Submitted OR		eclaration ubmitted after inf		Init	Not Yet Known Not Yet Known						
with Initial Filing	Fil (S	ing (surcharge 7 CFR 1.16 (e)) quired)	Examiner N		Not	Yet Kno	own				
My residence, post office I believe I am the original names are listed below)  the specification of white I a structed here! OR was filed on (MM/Application Number PC I hereby state that I have amended by any amonder I acknowledge the duty to	As a below named inventor, I hereby declare that:  My residence, post office address, and dittenship ere as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is elaimed and for which a patent is equant on the invention entitled:  ELECTRICALLY DRIVEN CAMSHAFT ADJUSTER  the specification of which  (Title of the Invention)  Is attached hereto										
Prior Foreign Application Number(s)		Country	Foreign Filing Dai				Copy Attached?				
102 48 351.5	(	Germany	10/17/2002			YES					
Additional toreign applic	ation num	ibers are listed on a s	supplemental priority o	ata sheet PT	0/58/11	2B attached h	ereto:				
Thereby claim the benefit of	inder 35	U.S.C. 119(e) of any	United States provision	nal application	n(8) list	ed below.					
Application Number	(£)	Filing Date	(MM/DD/YYYY)		aupple:	rs are listed mental priori	nal application on a ity data sheet ned hereto.				

Page 1 of 3 ]

Burden Mour Statement This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the lindwidual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 1450, Alexandria, VA 22313-1450.

<u>5.014/016</u>

## Rec'd PCT/PTO 15 MAR 2006

Express Mail Label No. EV442801839US

ease type a plus sign (+) insid	We this box $\longrightarrow$ $+$		proved for use the	hrough 9/30/00.					
Under the Paperwork Re a valid OMB control num	duction Act of 1995, no pera	Patent and Tradema one required to respon	d to a collection	of Information	unless it contains				
		Altorney Docks	t Number	INA-PT12	23 (4095-18-US)				
DECLARATION	FOR UTILITY O SIGN	First Named In	ventor	Schäfer	et al.				
•	PPLICATION	CO	COMPLETE IF KNOWN						
	R 1.63)	Application Num	nber Not	Yet Kno	wn .				
•		Filing Date	Not	Not Yet Known					
Submitted OR	Declaration Submitted after Initi	al Group Art Unit	Not	Yet Kno	wn				
with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	Not	Yet Kno	wn				
the specification of which is attached hereto OR  Is attached hereto OR  Application Number PCT.  I hereby state that I have reamended by any amondment is acknowledge the duty to distributions, listed below and has or of any PCT international at	TO/16/2 /EP2003/011455 and was Mayed and understand the onlight specifically referred to about the continuous information which is represented to the continuous properties under 35 U.S.C. PCT international application to the continuous plan intertified before the continuous plan intertified	claimed and for which a pa  IVEN CAMSHAFT  of the Invention)  as United  as amended on (MM/DD//  contents of the above ident  we.  119(a)-(d) or 355(b) of an  which designated at least  before that of the applicati  before that of the applicati	d States Application of the defined in 37 Clark of the country of	n the invantion  R  ation Number of  n, including the  R 1.58.  cation(s) for pa other than the or patent or box ority is claimed	PCT International (if applicable). o claims, as tient or inventor's United States of entor's certificate.				
Prior Foreign Application Number(s)	Country	Foreign Fliing Date (MM/DD/YYY)	Priority Not Claimed	Certified C	NO				
102 48 351.5	Germany	10/17/2002	0000	0000					
Additional foreign applicat	tion numbers are listed on a	upplemental priority data:	sheet PTC/SB/0	28 stached h	ereta:				
I hereby claim the benefit us	nder 35 U.S.C. 119(e) of any	United States provisional	optication(s) is	ted below.					
Application Number	s) Filing Date	(MM/DDYYYY)	numbi supple	ers are listed	ty data sheet				

[Page 1 of 3 ]

Burdon Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the smount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 1450, Alexandria, VA 22313-1450.

Pleaso type a pi	Undert	-) inside this bar he Paperwork F OMB control nu	leduction	+ Act o	f 1995, n	o pelso	P ons. are	atent and '				ncoso	3/30/00, OMB	MMERCE
DEC	DECLARATION — Utility or Design Patent Application													
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(a), or 365(c) of any PCT international application designating the United States of America, listed bollow and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information by manner application and the prior application and the prior application and the prior application.										application application				
		nt Applicati Numb	on or l					Parent F (MM/D)	llin	g Date		Pare	nt Palent N <i>If applicab</i>	amper
	D(	T/EP2003		55		-	1	(141)1-22						
☐ Additional	U.S. or P	CT International	applicat	on nu	mbers ar	e listed	OR A E	upplemen	Pal br	icrity data s	heel P	OISBA	2B attached h	ereto. n the Patent
As a named invo	ontor, I he Office coi	raby appoint the medical therews	pr: 🔀 (	Custor	ner Num		ver(s) ti	3624	B this	Apolication	ano to	► E	Number Ber	Code
				<i>OR</i> Regist	ered pra	ettione	t(a) ນອ	me/rogistr	ition	number list	ed belo	<u> </u>	Label bel	tration
	Name	1			Regist			<u> </u>		Name				nber
Namely, the Attorneys of Volpe and Koenig, P.C.												•		
Artelioosi r	enistered	practitioner(s) (	aned or	1 SUPP	lemental	Regist	ered P	ractitioner	Infor	mation she	et PTO/	SB/02C	attached here	to.
Direct all com		nce to: 🔀		er Nu	mber			524		OR I			endence addi	
Name	VOI	PE AND K					_			···				
Address														
									_					
Address								State ZIP						
City				7	clepho	ne	Fax							
Country  Telephone  I hereby declare that all statements made harein of my own knowledge are true and that all statements made on information and bellef are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are believed to be true; and further that these statements were made with the knowledge that willful false statements many jeopardize the validity of the punishable by line or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements many jeopardize the validity of the application or any patent issued thereon.														
	Name of Sole or First Inventor.  A petition has bean filed for this unsigned inventor													
Given Name (first and middle [if any]) , Family Name or Sumame														
	Jens Schäfer													
inventor's Signalure													Date	
Residence: (	äty	Herzoge	naura	ch	State			Countr		Ger	талу	,	Citizenship	German
Post Office A	dana	Splegel	gartei	nstr	asse	40		_						
Post Office A					······································									
, see outed to		Remonaca.						9	10	74	Cou	ntry	Gern	алу .

Please type a pluż sign (+) inside lhis box ——	4		U.S. Patent	and Trademar	k Office:	U.S. DEPARTM	PTO/SE/02A (11-00) 002. OMB 0651-0032 ENT OF COMMERCE	
Under the Patenwork Reduction Act of 1995, no persons  DECLARATION	U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE pond to a collection of information unless it contains a valid OMB control number  ADDITIONAL INVENTOR(S)  Supplemental Sheet Page 3 of 3							
Name of Additional Joint Inventor, if a	iny:		A petitio	on has been	illed for	this unsigned	inventor	
Given Name (first and middle [il an	yD	T				Sumamo		
Martin			<del></del>	S	teige	rwald		
Inventor's Signature						Date		
Residence: City Erlangen	State		Country	German	у	Citizenship	German	
Mailing Address Heinrich-Kirchner 32								
Mailing Address			,					
city. Erlangen	State		ZIP	91056	Count	<sub>ry</sub> G	ermany	
Name of Additional Joint Inventor, if a	ny:	. 🗆	A petition	has been fil	ed for th	ils unsigned in	rventor	
Given Name (first and middle [if any	<b>/</b> ])	Family Name or Sumame						
Jörg	Degelmann							
Inventor's Signature Wyw.	ōum	Date 27.4.1005						
Residence: City Bindlach-Benk	State		Country	Citizenship	, German			
Malling Address Robert-Meister-Stra	ısse 5							
Malling Address								
city Bindlach-Benk	State	,	ZIP	95463	Cou	intry C	Эегтапу	
Name of Additional Joint Inventor, if a	iny:		A pelition i	nas been file	d for this	vni benglenu s	entor	
Given Name (first and middle (if any	Family Name or Sumanie							
Jon _	Heywood							
Inventor's Signature	į					Date		
Residence: City Pettstadt	State		Country	Germ	any	Citizenshi	<sub>p</sub> German	
Mailing Address Sandstrasse 5				<del></del>				
Mailing Address		•	<del></del>					
D attacks alk			1	06175	- 1		Sermany	

## Rec'd PCT/PTO 15 MAR 2806

PTO-1390 (Rev. 07-2005)
Approved for use through 3/31/2007.
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. APPLICA	TION NO. (if known	see 37 CFR 1.5)	INTERNATIONAL AP	PLICATION NO.	ATTORNEY'S DOCKET NUMBER			
10/531,787			PCT/EP2003/011455		INA-PT123 (4095-18-US)			
Power of Att		mer Number 36	324 appears in Declara sing Requirements; and			sing		
The fol	lowing fees have b	een submitted	<del></del>		CALCULATIONS	PTO USE ONLY		
	•			\$300	\$	T		
	nination fee (37 Cf							
If the written opin	nion prepared by IS /US indicates all cl	\$						
If the written opin IPEA/US Search fee (37 C Internati International Sea previousl	S indicates all claim CFR 1.445(a)(2)) ha onal Searching Au arch Report prepar y communicated to	or the International as satisfy provisions as been paid on the thorityed by an ISA other to the US by the IB	preliminary examination repsion of PCT Article 33(1)-(4)e international application to than the US and provided to	\$0 the USPTO as an \$100 the Office or \$400	\$			
	TOTAL OF 21, 22	2 and 23 =			0			
sequence electroni	e listing in complia ic medium) (37 CF	nce with 37 CFR 1 R 1.492(j)).	in paper over 100 sheets (e: .821(c) or (e) or computer proof paper or fraction thereof.	xcluding rogram listing in an				
Total Sheets	Extra Sheets	l .	dditional 50 or fraction to a whole number)	RATE				
- 100 =	/50 =		· · · · · · · · · · · · · · · · · · ·	x \$250	\$	· ·		
Surcharge of \$13 after the date of	30.00 for furnishing commencement of	any of the search the national stage	fee, examination fee, or the (37 CFR 1.492(h)).	oath or declaration	\$ 130			
CLAIMS	NUMB	ER FILED	NUMBER EXTRA	RATE	\$ .			
Total claims	1	- 20 =		x \$ 50	\$			
Independent clai	ms	- 3 =		x \$200	\$			
MULTIPLE DEP	ENDENT CLAIM(S	) (if applicable)		+ \$360	\$	<u> </u>		
		CALCULATIONS =	\$ 130					
Applicant cla	aims small entity st							
		\$						
	of <b>\$130.00</b> for furnis date (37 CFR 1.492	\$						
		\$ 130						
		gnment (37 CFR 1 CFR 3.28, 3.31). <b>\$</b> 4	.21(h)). The assignment must be assignment be assignment be assignment be assignment be assignment be assignment be assigned by a sign be assigned by a sincrease by a sign be assigned by a sign be assigned by a sign be	st be accompanied +	\$			
			TOTAL F	EES ENCLOSED =	\$ 130			
)( MKAYPAGH 0000	124	00 00			Amount to be refunded:	\$		
17	7004	vv vi			Amount to be charged	\$		